

Fill in this information to identify your case:

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF FLORIDA

Case number (if known) _____

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

 Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Carl

First name

W.

Middle name

Cline

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-6119

Debtor 1 Carl W. Cline

Case number (if known) _____

About Debtor 1:**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years** I have not used any business name or EINs.Include trade names and *doing business as* names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live**904 Liatris Loop
Saint Johns, FL 32259**

Number, Street, City, State & ZIP Code

Saint Johns

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy**Check one:**

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Carl W. Cline

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No.
 Yes.

District	Middle District of FL, Jacksonville Division	When	<u>11/21/16</u>	Case number	<u>3:16-bk-04263-JAF</u>
District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No
 Yes.

Debtor	_____	Relationship to you	_____		
District	_____	When	_____	Case number, if known	_____
Debtor	_____	Relationship to you	_____		
District	_____	When	_____	Case number, if known	_____

11. Do you rent your residence?

No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
 No. Go to line 12.
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Carl W. Cline

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?** No. Go to Part 4. Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

 No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

 No. Yes.

What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Carl W. Cline

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):*You must check one:*

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

 Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

 Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

 Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Debtor 1 Carl W. Cline

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."		
	<input checked="" type="checkbox"/> No. Go to line 16b.		
	<input type="checkbox"/> Yes. Go to line 17.		
16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.		
	<input type="checkbox"/> No. Go to line 16c.		
	<input checked="" type="checkbox"/> Yes. Go to line 17.		
16c.	State the type of debts you owe that are not consumer debts or business debts		
<hr/>			
17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18.		
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?		
	<input type="checkbox"/> No		
	<input type="checkbox"/> Yes		
<hr/>			
18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
	<input type="checkbox"/> 50-99	<input type="checkbox"/> 5001-10,000	<input type="checkbox"/> 50,001-100,000
	<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
	<input type="checkbox"/> 200-999		
<hr/>			
19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion
<hr/>			
20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million	<input type="checkbox"/> \$500,000,001 - \$1 billion
	<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion
	<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion
	<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Carl W. Cline**Carl W. Cline**

Signature of Debtor 1

Signature of Debtor 2

Executed on April 21, 2017
MM / DD / YYYYExecuted on _____
MM / DD / YYYY

Debtor 1 Carl W. Cline

Case number (if known) _____

For your attorney, if you are represented by one

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jerrett M. McConnell

Signature of Attorney for Debtor

Date

April 21, 2017

MM / DD / YYYY

Jerrett M. McConnell

Printed name

McConnell Law Group, P.A.

Firm name

**98 Glenalby Place
Ponte Vedra, FL 32081**

Number, Street, City, State & ZIP Code

Contact phone

(904) 824-2222

Email address

jmcconnell@mcconnelllawgroup.com**0244960**

Bar number & State

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
Case number (if known)			

Check if this is an amended filing

B 104**For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders**

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

Unsecured claim		
-NON E-	What is the nature of the claim?	\$ _____
As of the date you file, the claim is: Check all that apply		
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply		
Does the creditor have a lien on your property?		
Contact	No	\$ _____
Contact phone	Yes. Total claim (secured and unsecured)	\$ _____
	Value of security:	- \$ _____
	Unsecured claim	\$ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

X /s/ Carl W. Cline
Carl W. Cline
 Signature of Debtor 1

X _____
 Signature of Debtor 2

Date April 21, 2017

Date _____

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new **Summary** and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets
		Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 2,260,175.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 609,869.00
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 2,870,044.00

Part 2: Summarize Your Liabilities

		Your liabilities
		Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 3,018,168.62
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 0.00
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 0.00
		Your total liabilities
		\$ 3,018,168.62

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 6,000.00
5.	Schedule J: Your Expenses (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 4,980.00

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?**

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Carl W. Cline

Case number (if known) _____

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ _____

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>0.00</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	<u>+\$ 0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>0.00</u>

Fill in this information to identify your case and this filing:

Debtor 1	Carl W. Cline	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA	
Case number		

Check if this is an amended filing

Official Form 106A/B**Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

No. Go to Part 2.

Yes. Where is the property?

1.1

904 Liatris Loop

Street address, if available, or other description

Saint Johns **FL** **32259-0000**

City State ZIP Code

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?

\$600,000.00

Current value of the portion you own?

\$600,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:

1.2

8360 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
\$42,500.00	\$42,500.00

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.3

8366 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
\$40,500.00	\$40,500.00

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:

1.4

8372 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
<u>\$42,500.00</u>	<u>\$42,500.00</u>

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.5

8375 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
<u>\$42,500.00</u>	<u>\$42,500.00</u>

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:

1.6

8381 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
\$42,500.00	\$42,500.00

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.7

8387 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
\$42,500.00	\$42,500.00

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:

1.8

8419 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
<u>\$42,500.00</u>	<u>\$42,500.00</u>

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.9

8427 Pineverde Ln

Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville FL 32244-0000

City State ZIP Code

Current value of the entire property?	Current value of the portion you own?
<u>\$42,500.00</u>	<u>\$42,500.00</u>

Duval

County

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.1
0**8467 Pineverde Ln**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$42,500.00****Current value of the portion you own?****\$42,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.1
1**8384 Pineverde Ln**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$42,500.00****Current value of the portion you own?****\$42,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.1
2**8515 Pineverde Ln**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$42,500.00****Current value of the portion you own?****\$42,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.1
3**8572 Pineverde Ln**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$42,500.00****Current value of the portion you own?****\$42,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:

1.1
4

10648 Coleman Rd S.
Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville **FL** **32257-0000**

City State ZIP Code

Duval
County

Current value of the entire property? **\$52,250.00** **Current value of the portion you own?** **\$52,250.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.1
5

4433 Winderbrook Ct
Street address, if available, or other description

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Jacksonville **FL** **32257-0000**

City State ZIP Code

Duval
County

Current value of the entire property? **\$55,000.00** **Current value of the portion you own?** **\$55,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.1
6**5518 Bennington Dr**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$37,500.00****Current value of the portion you own?****\$37,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.1
7**5648 Bryner Dr**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$37,500.00****Current value of the portion you own?****\$37,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.1
8**5844 Liska Dr**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$37,500.00****Current value of the portion you own?****\$37,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.1
9**5846 Liska Dr**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$37,500.00****Current value of the portion you own?****\$37,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.2
0**5862 Liska Dr**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****\$34,547.00****Current value of the portion you own?****\$34,547.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Duval

County

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another _____

 Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.2
1**5871 Liska Dr**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.**Current value of the entire property?****\$40,000.00****Current value of the portion you own?****\$40,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple **Check if this is community property**
(see instructions)**Who has an interest in the property? Check one**

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:

1.2

2

8448 Boysenberry Ln

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$92,500.00****Current value of the portion you own?****\$92,500.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.2

3

7615 Melissa Court N

Street address, if available, or other description

Jacksonville FL 32210-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$27,000.00****Current value of the portion you own?****\$27,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.2
4**757 Centruy 21 Drive**

Street address, if available, or other description

Jacksonville FL 32216-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$32,000.00 **Current value of the portion you own? \$32,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.2
5**3052 Cobblewood Ln W**

Street address, if available, or other description

Jacksonville FL 32225-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$77,750.00 **Current value of the portion you own? \$77,750.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.2
6**7103 Prestwick Cir N**

Street address, if available, or other description

Jacksonville FL 32244-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$45,000.00 **Current value of the portion you own? \$45,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.2
7**10824 Happy Vale Rd**

Street address, if available, or other description

Jacksonville FL 32246-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$76,128.00 **Current value of the portion you own? \$76,128.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Carl W. Cline

Case number (if known) _____

If you own or have more than one, list here:1.2
8**2273 Ironstone Dr E**

Street address, if available, or other description

Jacksonville FL 32246-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$70,000.00	\$70,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:1.2
9**320 1st St**

Street address, if available, or other description

Atlantic Beach FL 32233-0000

City State ZIP Code

What is the property? Check all that apply

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?	Current value of the portion you own?
\$400,000.00	\$400,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee simple

Check if this is community property
(see instructions)

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$2,260,175.00**Part 2: Describe Your Vehicles**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

Debtor 1 Carl W. Cline

Case number (if known) _____

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

3.1 Make: Ford
 Model: Mustang
 Year: 2002
 Approximate mileage: 88,000
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$5,200.00 \$5,200.00

3.2 Make: Chevrolet
 Model: Avalanche
 Year: 2002
 Approximate mileage: 165000
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$6,000.00 \$6,000.00

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

4.1 Make: 4x6' Utility Trailer
 Model: _____
 Year: 2010
 Other information:

Who has an interest in the property? Check one

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Check if this is community property
 (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$150.00 \$150.00

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for
 .pages you have attached for Part 2. Write that number here.....=>

\$11,350.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe.....

**assorted household goods and furnishings as appraised by Peter
 Mocke on 9/3/2016**

\$6,571.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Debtor 1 Carl W. Cline

Case number (if known) _____

 Yes. Describe.....**8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No Yes. Describe.....**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe.....**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment No Yes. Describe.....**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories No Yes. Describe.....**Men' clothing and accessories****\$250.00****12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe.....**13. Non-farm animals***Examples:* Dogs, cats, birds, horses No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$6,821.00**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....**Cash****\$100.00****17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

Debtor 1 Carl W. Cline

Case number (if known) _____

17.1. Checking	Atlantic Coast Bank	\$3.00
17.2. Checking	Compass Bank	\$123.00
17.3. Checking	Regions Bank	\$15.00
17.4. Savings	Navy Federal Credit Union	\$800.00
17.5. Checking--property operating account	Suntrust Bank	\$199.00
17.6. Savings	Suntrust Bank	\$1,500.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account:

Institution name:

Roth IRA	Raymond James	\$313,739.00
Roth IRA	Madison Trust Company	\$274,500.00
IRA	Wells Fargo (non-active account; would cost more to close account than the account is worth)	\$18.00
401(k)	Mass Mutual	\$701.00

22. Security deposits and prepayments*Your share of all unused deposits you have made so that you may continue service or use from a company**Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No

Debtor 1 Carl W. Cline

Case number (if known) _____

 Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them....**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them....**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them....**Money or property owed to you?**

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.....**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information..**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....

Debtor 1 Carl W. Cline

Case number (if known) _____

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$591,698.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2		\$2,260,175.00
56. Part 2: Total vehicles, line 5	\$11,350.00	
57. Part 3: Total personal and household items, line 15	\$6,821.00	
58. Part 4: Total financial assets, line 36	\$591,698.00	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
62. Total personal property. Add lines 56 through 61...	\$609,869.00	Copy personal property total
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$2,870,044.00

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF FLORIDA	
Case number (if known)			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own <small>Copy the value from <i>Schedule A/B</i></small>	Amount of the exemption you claim <small>Check only one box for each exemption.</small>	Specific laws that allow exemption
904 Liatris Loop Saint Johns, FL 32259 Saint Johns County Line from <i>Schedule A/B</i> : 1.1	\$600,000.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(1); Fla. Stat. Ann. §§ 222.01 & 222.02
2002 Chevrolet Avalanche 165000 miles Line from <i>Schedule A/B</i> : 3.2	\$6,000.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(1)
assorted household goods and furnishings as appraised by Peter Mocke on 9/3/2016 Line from <i>Schedule A/B</i> : 6.1	\$6,571.00	<input checked="" type="checkbox"/> \$1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
Roth IRA: Raymond James Line from <i>Schedule A/B</i> : 21.1	\$313,739.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.21(2)
Roth IRA: Madison Trust Company Line from <i>Schedule A/B</i> : 21.2	\$274,500.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.21(2)

Debtor 1 **Carl W. Cline**

Case number (if known)

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>	
401(k): Mass Mutual Line from <i>Schedule A/B</i> : 21.4	\$701.00	<input checked="" type="checkbox"/> 100% <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.21(2)

3. **Are you claiming a homestead exemption of more than \$160,375?**

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF FLORIDA	
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Ditech Financial LLC	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Creditor's Name	5846 Liska Dr Jacksonville, FL 32244 Duval County	\$91,598.28	\$37,500.00	\$0.00

PO Box 6172
Rapid City, SD 57709

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 2006

Last 4 digits of account number 5578

2.2	Ditech Financial LLC	Describe the property that secures the claim:	Column A Amount of claim	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Creditor's Name	7615 Melissa Court N Jacksonville, FL 32210 Duval County	\$43,387.00	\$27,000.00	\$0.00

PO Box 6172
Rapid City, SD 57709

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred 2006

Last 4 digits of account number 5560

Debtor 1 Carl W. Cline	First Name	Middle Name	Last Name	Case number (if known)
2.3 Federal National Mortgage Creditor's Name c/o Choice Legal Group, P.A. PO Box 9908 Fort Lauderdale, FL 33310				
Describe the property that secures the claim: 5648 Bryner Dr Jacksonville, FL 32244 Duval County				\$55,873.84
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				\$37,500.00
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage				\$0.00
Number, Street, City, State & Zip Code				
Who owes the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred 2006		Last 4 digits of account number 1202		
2.4 GKC Finance Service, LLC Creditor's Name c/o Steve Felkowitz 4310 Sheridan St., Ste 202 Hollywood, FL 33021				Describe the property that secures the claim: 10648 Coleman Rd S. Jacksonville, FL 32257 Duval County
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				\$79,787.00
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage				\$52,250.00
Number, Street, City, State & Zip Code				
Who owes the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred 2008		Last 4 digits of account number 0006		
2.5 GKC Finance Service, LLC Creditor's Name c/o Steve Felkowitz 4310 Sheridan St., Ste 202 Hollywood, FL 33021				Describe the property that secures the claim: 4433 Winderbrook Ct Jacksonville, FL 32257 Duval County
As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed				\$87,040.00
Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage				\$55,000.00
Number, Street, City, State & Zip Code				
Who owes the debt? Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				
Date debt was incurred 2008		Last 4 digits of account number 0018		

Debtor 1 **Carl W. Cline**

First Name Middle Name Last Name

Case number (if known)

2.6 **Heather Ridge HOA**

Creditor's Name

The CAM Team, Inc.
1008-120 Park Ave.
Orange Park, FL 32073

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**7058 Prestwick Cir N Jacksonville,
 FL 32244 Duval County**

\$700.00

\$43,336.00

\$0.00

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred **12/2016**Last 4 digits of account number **G04D**2.7 **Heather Ridge HOA**

Creditor's Name

The CAM Team, Inc.
1008-120 Park Ave.
Orange Park, FL 32073

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**7103 Prestwick Cir N Jacksonville,
 FL 32244 Duval County**

\$700.00

\$45,000.00

\$0.00

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred **12/2016**Last 4 digits of account number **G09A**2.8 **Metropolitan Mixed Use COA**

Creditor's Name

**c/o Assoc. Mgmt of
 Ponte Ved
 3108 Sawgrass Village
 Cir.
 Ponte Vedra Beach, FL
 32082**

Number, Street, City, State & Zip Code

Describe the property that secures the claim:

**320 1st St Atlantic Beach, FL 32233
 Duval County**

\$3,500.00

\$400,000.00

\$0.00

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred **12/2016**Last 4 digits of account number **801**

Debtor 1 **Carl W. Cline**

First Name Middle Name Last Name

Case number (if known)

2.9	Michael Corrigan Creditor's Name Duval County Tax Collector 231 E. Forsyth St., Ste 300 Jacksonville, FL 32202 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 7103 Prestwick Cir N Jacksonville, FL 32244 Duval County	\$1,048.78	\$45,000.00	\$0.00
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Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

 Contingent Unliquidated Disputed**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred **4/2017**Last 4 digits of account number **1084**

2.1	Michael Corrigan Creditor's Name Duval County Tax Collector 231 E. Forsyth St., Ste 300 Jacksonville, FL 32202 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 8448 Boysenberry Ln Jacksonville, FL 32244 Duval County	\$2,224.44	\$92,500.00	\$0.00
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Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

 Contingent Unliquidated Disputed**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred **4/2017**Last 4 digits of account number **0972**

2.1	Michael Corrigan Creditor's Name Duval County Tax Collector 231 E. Forsyth St., Ste 300 Jacksonville, FL 32202 Number, Street, City, State & Zip Code	Describe the property that secures the claim: 3052 Cobblewood Ln W Jacksonville, FL 32225 Duval County	\$1,123.64	\$77,750.00	\$0.00
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Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

 Contingent Unliquidated Disputed**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Date debt was incurred **4/2017**Last 4 digits of account number **4226**

Debtor 1 Carl W. Cline			Case number (if known)
First Name	Middle Name	Last Name	
<p>2.1 2 Michael Corrigan</p> <p>Creditor's Name Duval County Tax Collector 231 E. Forsyth St., Ste 300 Jacksonville, FL 32202</p> <p>Number, Street, City, State & Zip Code</p>			
<p>Describe the property that secures the claim: 2273 Ironstone Dr E Jacksonville, FL 32246 Duval County</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			\$1,550.01
<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p>			\$70,000.00
<p>Date debt was incurred 4/2017</p>			Last 4 digits of account number 1108
<p>2.1 3 Michael Corrigan</p> <p>Creditor's Name Duval County Tax Collector 231 E. Forsyth St., Ste 300 Jacksonville, FL 32202</p> <p>Number, Street, City, State & Zip Code</p>			
<p>Describe the property that secures the claim: 10824 Happy Vale Rd Jacksonville, FL 32246 Duval County</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			\$1,841.13
<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p>			\$76,128.00
<p>Date debt was incurred 4/2017</p>			Last 4 digits of account number 0254
<p>2.1 4 Michael Corrigan</p> <p>Creditor's Name Duval County Tax Collector 231 E. Forsyth St., Ste 300 Jacksonville, FL 32202</p> <p>Number, Street, City, State & Zip Code</p>			
<p>Describe the property that secures the claim: 320 1st St Atlantic Beach, FL 32233 Duval County</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>			\$7,166.28
<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset)</p>			\$400,000.00
<p>Date debt was incurred 4/2017</p>			Last 4 digits of account number 1200

Debtor 1 **Carl W. Cline**

First Name

Middle Name

Last Name

Case number (if known)

2.1 **5 Nationstar Mortgage, LLC**

Creditor's Name

**PO Box 9096
Temecula, CA 92589**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Describe the property that secures the claim:

**5844 Liska Dr Jacksonville, FL
32244 Duval County****\$60,369.04****\$37,500.00****\$0.00**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2006****Last 4 digits of account number** **3080**2.1 **6 Nationstar Mortgage, LLC**

Creditor's Name

**PO Box 9096
Temecula, CA 92589**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Describe the property that secures the claim:

**5871 Liska Dr Jacksonville, FL
32244 Duval County****\$79,950.00****\$40,000.00****\$0.00**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2004****Last 4 digits of account number** **1236**2.1 **7 Nationstar Mortgage, LLC**

Creditor's Name

**PO Box 9096
Temecula, CA 92589**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Describe the property that secures the claim:

**5862 Liska Dr Jacksonville, FL
32244 Duval County****\$74,100.00****\$34,547.00****\$0.00**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2004****Last 4 digits of account number** **1210**

Debtor 1 **Carl W. Cline**

First Name

Middle Name

Last Name

Case number (if known)

2.1 **Nationstar Mortgage,
LLC**

Creditor's Name

**PO Box 9096
Temecula, CA 92589**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Describe the property that secures the claim:
**5518 Bennington Dr Jacksonville,
FL 32244 Duval County****\$55,900.00****\$37,500.00****\$0.00**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2004**Last 4 digits of account number **1194**2.1 **Regions Bank**

Creditor's Name

**P.O. Box 2153
Birmingham, AL 35287**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Describe the property that secures the claim:
**320 1st St Atlantic Beach, FL 32233
Duval County****\$516,872.55****\$400,000.00****\$0.00**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **First Mortgage**

Date debt was incurred **2006**Last 4 digits of account number **8653**2.2 **Regions Mortgage**

Creditor's Name

**PO Box 18001
Hattiesburg, MS
39404-8001**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Describe the property that secures the claim:
**8448 Boysenberry Ln Jacksonville,
FL 32244 Duval County****\$132,000.00****\$92,500.00****\$0.00**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2004**Last 4 digits of account number **3961**

Debtor 1	Carl W. Cline		Case number (if known)
	First Name	Middle Name	Last Name
2.2	Regions Mortgage		
	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8360 Pineverde Ln Jacksonville, FL 32244 Duval County	
		As of the date you file, the claim is: Check all that apply.	
<input type="checkbox"/> Contingent		<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed			
Nature of lien. Check all that apply.			
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Judgment lien from a lawsuit		<input checked="" type="checkbox"/> Other (including a right to offset) Mortgage	
Date debt was incurred 2004		Last 4 digits of account number 4388	
2.2	Regions Mortgage		
	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8366 Pineverde Ln Jacksonville, FL 32244 Duval County	
		As of the date you file, the claim is: Check all that apply.	
<input type="checkbox"/> Contingent		<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed			
Nature of lien. Check all that apply.			
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Judgment lien from a lawsuit		<input checked="" type="checkbox"/> Other (including a right to offset) Mortgage	
Date debt was incurred 2004		Last 4 digits of account number 4388	
2.2	Regions Mortgage		
	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8372 Pineverde Ln Jacksonville, FL 32244 Duval County	
		As of the date you file, the claim is: Check all that apply.	
<input type="checkbox"/> Contingent		<input type="checkbox"/> Unliquidated	
<input type="checkbox"/> Disputed			
Nature of lien. Check all that apply.			
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Judgment lien from a lawsuit		<input checked="" type="checkbox"/> Other (including a right to offset) Mortgage	
Date debt was incurred 2004		Last 4 digits of account number 4388	

Debtor 1	Carl W. Cline		Case number (if known)
First Name	Middle Name	Last Name	
2.2	Regions Mortgage		
4	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8375 Pineverde Ln Jacksonville, FL 32244 Duval County	\$158,876.94
Number, Street, City, State & Zip Code		As of the date you file, the claim is: Check all that apply.	\$42,500.00
		<input type="checkbox"/> Contingent	\$0.00
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Who owes the debt? Check one.		Nature of lien. Check all that apply.	
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other (including a right to offset) Mortgage	
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 2004		Last 4 digits of account number 2002	
2.2	Regions Mortgage		
5	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8381 Pineverde Ln Jacksonville, FL 32244 Duval County	\$158,876.94
Number, Street, City, State & Zip Code		As of the date you file, the claim is: Check all that apply.	\$42,500.00
		<input type="checkbox"/> Contingent	\$0.00
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Who owes the debt? Check one.		Nature of lien. Check all that apply.	
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other (including a right to offset) Mortgage	
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 2004		Last 4 digits of account number 2002	
2.2	Regions Mortgage		
6	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8387 Pineverde Ln Jacksonville, FL 32244 Duval County	\$158,876.94
Number, Street, City, State & Zip Code		As of the date you file, the claim is: Check all that apply.	\$42,500.00
		<input type="checkbox"/> Contingent	\$0.00
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Who owes the debt? Check one.		Nature of lien. Check all that apply.	
<input checked="" type="checkbox"/> Debtor 1 only		<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)	
<input type="checkbox"/> Debtor 2 only		<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)	
<input type="checkbox"/> Debtor 1 and Debtor 2 only		<input type="checkbox"/> Judgment lien from a lawsuit	
<input type="checkbox"/> At least one of the debtors and another		<input checked="" type="checkbox"/> Other (including a right to offset) Mortgage	
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 2004		Last 4 digits of account number 2002	

Debtor 1	Carl W. Cline		Case number (if known)
	First Name	Middle Name	Last Name
2.2	Regions Mortgage		
7	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Number, Street, City, State & Zip Code	Describe the property that secures the claim: 8467 Pineverde Ln Jacksonville, FL 32244 Duval County
			\$52,801.84
			\$42,500.00
			\$0.00
<p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>		<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input checked="" type="checkbox"/> Other (including a right to offset) Mortgage</p>	
Date debt was incurred 2004		Last 4 digits of account number 8329	
2.2	Regions Mortgage		Describe the property that secures the claim:
8	Creditor's Name		8451 Pineverde Ln Jacksonville, FL 32244 Duval County
PO Box 18001 Hattiesburg, MS 39404-8001		Number, Street, City, State & Zip Code	\$52,801.84
			\$42,500.00
			\$0.00
<p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>		<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input checked="" type="checkbox"/> Other (including a right to offset) Mortgage</p>	
Date debt was incurred 2004		Last 4 digits of account number 7933	
2.2	Regions Mortgage		Describe the property that secures the claim:
9	Creditor's Name		8419 Pineverde Ln Jacksonville, FL 32244 Duval County
PO Box 18001 Hattiesburg, MS 39404-8001		Number, Street, City, State & Zip Code	\$53,602.62
			\$42,500.00
			\$0.00
<p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p>			
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>		<p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input checked="" type="checkbox"/> Other (including a right to offset) Mortgage</p>	
Date debt was incurred 2004		Last 4 digits of account number 3907	

Debtor 1	Carl W. Cline		Case number (if known)
	First Name	Middle Name	Last Name
2.3 0	Regions Mortgage		
	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8427 Pineverde Ln Jacksonville, FL 32244 Duval County	
		\$53,602.62	\$42,500.00
		\$0.00	
Number, Street, City, State & Zip Code			
Who owes the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
As of the date you file, the claim is: Check all that apply.		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Nature of lien. Check all that apply.			
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage			
Date debt was incurred 2004		Last 4 digits of account number 5729	
2.3 1	Regions Mortgage		
	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8384 Pineverde Ln Jacksonville, FL 32244 Duval County	
\$52,801.84	\$42,500.00		\$0.00
Number, Street, City, State & Zip Code			
Who owes the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
As of the date you file, the claim is: Check all that apply.		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Nature of lien. Check all that apply.			
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage			
Date debt was incurred 2004		Last 4 digits of account number 0663	
2.3 2	Regions Mortgage		
	Creditor's Name		
PO Box 18001 Hattiesburg, MS 39404-8001		Describe the property that secures the claim: 8572 Pineverde Ln Jacksonville, FL 32244 Duval County	
\$52,801.84	\$42,500.00		\$0.00
Number, Street, City, State & Zip Code			
Who owes the debt? Check one.			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt			
As of the date you file, the claim is: Check all that apply.		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Nature of lien. Check all that apply.			
<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage			
Date debt was incurred 2004		Last 4 digits of account number 3360	

Debtor 1 Carl W. Cline	First Name	Middle Name	Last Name	Case number (if known)
2.3 3 Regions Mortgage Creditor's Name				
PO Box 18001 Hattiesburg, MS 39404-8001 Number, Street, City, State & Zip Code				Describe the property that secures the claim: 757 Centruy 21 Drive Jacksonville, FL 32216 Duval County
Who owes the debt? Check one.				As of the date you file, the claim is: Check all that apply.
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				Nature of lien. Check all that apply.
				<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage
Date debt was incurred 2004		Last 4 digits of account number 5076		
2.4 4 Regions Mortgage Creditor's Name				Describe the property that secures the claim: 3052 Cobblewood Ln W Jacksonville, FL 32225 Duval County
PO Box 18001 Hattiesburg, MS 39404-8001 Number, Street, City, State & Zip Code				\$95,865.91 \$77,750.00 \$0.00
Who owes the debt? Check one.				As of the date you file, the claim is: Check all that apply.
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				Nature of lien. Check all that apply.
				<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage
Date debt was incurred 2004		Last 4 digits of account number 9518		
2.5 5 Regions Mortgage Creditor's Name				Describe the property that secures the claim: 7103 Prestwick Cir N Jacksonville, FL 32244 Duval County
PO Box 18001 Hattiesburg, MS 39404-8001 Number, Street, City, State & Zip Code				\$91,946.82 \$45,000.00 \$0.00
Who owes the debt? Check one.				As of the date you file, the claim is: Check all that apply.
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt				<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				Nature of lien. Check all that apply.
				<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input checked="" type="checkbox"/> Other (including a right to offset) Mortgage
Date debt was incurred 2004		Last 4 digits of account number 9526		

Debtor 1 **Carl W. Cline**

First Name Middle Name Last Name

Case number (if known)

2.3 6	Regions Mortgage Creditor's Name	Describe the property that secures the claim: 2273 Ironstone Dr E Jacksonville, FL 32246 Duval County	\$103,733.49	\$70,000.00	\$0.00
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PO Box 18001
Hattiesburg, MS
39404-8001

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2004**Last 4 digits of account number **8965**

2.3 7	Regions Mortgage Creditor's Name	Describe the property that secures the claim: 10824 Happy Vale Rd Jacksonville, FL 32246 Duval County	\$103,843.20	\$76,128.00	\$0.00
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PO Box 18001
Hattiesburg, MS
39404-8001

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Mortgage**

Date debt was incurred **2004**Last 4 digits of account number **9500**

2.3 8	Wilson Cline Creditor's Name	Describe the property that secures the claim: 2002 Ford Mustang 88,000 miles	\$5,500.00	\$5,200.00	\$0.00
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8337 SE 177th Bartram Loop
The Villages, FL 32162

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) **Purchase Money Security**

Date debt was incurred _____

Last 4 digits of account number _____

Debtor 1 **Carl W. Cline**

First Name Middle Name Last Name

Case number (if known)

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.
Write that number here:

\$3,018,168.62

\$3,018,168.62

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Chase Mortgage P.O. Box 9001871 Louisville, KY 40290-1020	On which line in Part 1 did you enter the creditor? <u>2.16</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Chase Mortgage P.O. Box 9001871 Louisville, KY 40290-1020	On which line in Part 1 did you enter the creditor? <u>2.17</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Chase Mortgage P.O. Box 9001871 Louisville, KY 40290-1020	On which line in Part 1 did you enter the creditor? <u>2.18</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.20</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.21</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.22</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.23</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.24</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.25</u>

Debtor 1 **Carl W. Cline**

First Name Middle Name Last Name

Case number (if known) _____

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.26</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.27</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.28</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.29</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.30</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.31</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.32</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.33</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.34</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.35</u>
		Last 4 digits of account number _____
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.36</u>
		Last 4 digits of account number _____

Debtor 1 **Carl W. Cline**

First Name

Middle Name

Last Name

Case number (if known) _____

<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Gibbons Neuman 3321 Henderson Blvd Tampa, FL 33609	On which line in Part 1 did you enter the creditor? <u>2.37</u>
<input type="checkbox"/>	Name, Number, Street, City, State & Zip Code Shapiro, Fishman & Gache 4630 Woodland Corporate Blvd Suite 100 Tampa, FL 33614	On which line in Part 1 did you enter the creditor? <u>2.15</u>

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF FLORIDA	
Case number (if known)			

Check if this is an
amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ 0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
Total claims from Part 2	6f. Student loans	6f.	\$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 0.00
	6j. Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 0.00

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
Case number (if known)			

Check if this is an
amended filing

Official Form 106G**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			State what the contract or lease is for
2.1			
Name Number Street City State ZIP Code			
2.2			
Name Number Street City State ZIP Code			
2.3			
Name Number Street City State ZIP Code			
2.4			
Name Number Street City State ZIP Code			
2.5			
Name Number Street City State ZIP Code			

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
Case number (if known)			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Number
City

Street

State

ZIP Code

3.2

Name

Schedule D, line _____

Schedule E/F, line _____

Schedule G, line _____

Number
City

Street

State

ZIP Code

Fill in this information to identify your case:

Debtor 1	Carl W. Cline
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA
Case number (if known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation		
Employer's name		
Employer's address		

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>N/A</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>N/A</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>N/A</u>

Debtor 1 **Carl W. Cline**

Case number (if known) _____

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ N/A
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ N/A
5e. Insurance	5e. \$ 0.00	\$ N/A
5f. Domestic support obligations	5f. \$ 0.00	\$ N/A
5g. Union dues	5g. \$ 0.00	\$ N/A
5h. Other deductions. Specify: _____	5h.+ \$ 0.00	+ \$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 0.00	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 0.00	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 3,000.00	\$ N/A
8b. Interest and dividends	8b. \$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 3,000.00	\$ N/A
8d. Unemployment compensation	8d. \$ 0.00	\$ N/A
8e. Social Security	8e. \$ 0.00	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ 0.00	\$ N/A
8g. Pension or retirement income	8g. \$ 0.00	\$ N/A
8h. Other monthly income. Specify: _____	8h.+ \$ 0.00	+ \$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 6,000.00	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 6,000.00	+ \$ N/A = \$ 6,000.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ 6,000.00	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____	Debtor performed contract work for Shepherds Finance, LLC on an as needed basis in January, February and March of 2017. Debtor netted \$3,092 after expenses for this work. As this work is done on an as needed basis, Debtor is not anticipating doing further work for Shepherds Finance, LLC at this time and has not included this income on his schedules for determining feasibility.	

Fill in this information to identify your case:

Debtor 1	Carl W. Cline
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA
Case number (If known)	

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

No. Go to line 2.
 Yes. **Does Debtor 2 live in a separate household?**
 No
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household* of Debtor 2.

2. Do you have dependents? NoDo not list Debtor 1 and
Debtor 2. Yes. Fill out this information for
each dependent.....Dependent's relationship to
Debtor 1 or Debtor 2Dependent's
ageDoes dependent
live with you?Do not state the
dependents names.**Son****16**

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

Son**17****Son****17****3. Do your expenses include
expenses of people other than
yourself and your dependents? No
 Yes****Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses**4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.**4. \$ **0.00****If not included in line 4:**

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	500.00
4b. \$	125.00
4c. \$	250.00
4d. \$	125.00
5. \$	0.00

Debtor 1 **Carl W. Cline**

Case number (if known) _____

6. Utilities:	6a. Electricity, heat, natural gas	6a. \$ 550.00
	6b. Water, sewer, garbage collection	6b. \$ 0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 180.00
	6d. Other. Specify: _____	6d. \$ 0.00
7. Food and housekeeping supplies	7. \$ 1,000.00	
8. Childcare and children's education costs	8. \$ 400.00	
9. Clothing, laundry, and dry cleaning	9. \$ 100.00	
10. Personal care products and services	10. \$ 50.00	
11. Medical and dental expenses	11. \$ 100.00	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 400.00	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 400.00	
14. Charitable contributions and religious donations	14. \$ 100.00	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ 0.00	
15b. Health insurance	15b. \$ 0.00	
15c. Vehicle insurance	15c. \$ 125.00	
15d. Other insurance. Specify: _____	15d. \$ 0.00	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00	
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$ 100.00	
17b. Car payments for Vehicle 2	17b. \$ 100.00	
17c. Other. Specify: Auto Lease	17c. \$ 375.00	
17d. Other. Specify: _____	17d. \$ 0.00	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ 0.00	
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0.00	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$ 0.00	
20b. Real estate taxes	20b. \$ 0.00	
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00	
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00	
20e. Homeowner's association or condominium dues	20e. \$ 0.00	
21. Other: Specify: _____	21. +\$ 0.00	
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$ 4,980.00	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ 4,980.00	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 4,980.00	
23. Calculate your monthly net income.		
23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I.	23a. \$ 6,000.00	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ 4,980.00	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ 1,020.00	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Carl W. Cline

Carl W. Cline

Signature of Debtor 1

Date April 21, 2017

X

Signature of Debtor 2

Date

Fill in this information to identify your case:

Debtor 1	Carl W. Cline		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
Case number (if known)			

Check if this is an amended filing

Official Form 107**Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:**Dates Debtor 1
lived there****Debtor 2 Prior Address:****Dates Debtor 2
lived there****3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)**

No
 Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2 Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

Debtor 1	Debtor 2
Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Sources of income Check all that apply.
	Gross income (before deductions and exclusions)

Debtor 1 Carl W. Cline

Case number (if known) _____

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Alimony / Maintenance	\$12,000.00		
	Contract Work	\$3,092.00		
For last calendar year: (January 1 to December 31, 2016)	Alimony / Maintenance	\$36,000.00		
For the calendar year before that: (January 1 to December 31, 2015)	IRA Distributions	\$98,527.00		
	Alimony / Maintenance	\$9,000.00		

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...

Debtor 1 Carl W. Cline

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
----------------------------	------------------	-------------------	----------------------	--

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Regions v. Cline 16-2015-CA-7574	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2015-CA-6695	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2015-CA-7026	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2015-CA-7158	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2015-CA-7732	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Nationstar v. Cline 16-2015-CA-7155	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor 1 Carl W. Cline

Case number (if known) _____

Case title Case number	Nature of the case	Court or agency	Status of the case
Nationstar v. Cline 16-2015-CA-7148	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Nationstar v. Cline 16-2015-CA-7178	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Nationstar v. Cline 16-2016-CA-0020	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2016-CA-0444	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2016-CA-0621	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Regions v. Cline 16-2016-CA-0887	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Fannie Mae v. Cline 16-2016-CA-2761	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case Dismissed			
Bank of NY Mellon v. Cline 16-2016-CA-3432	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Bank of America v. Cline 16-2016-CA-3826	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Bank of America v. Cline 16-2016-CA-4228	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Bank of NY Mellon v. Cline 16-2016-CA-5348	Foreclosure	Circuit Court, 4th Judicial Circuit Jacksonville, FL 32201	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor 1 Carl W. Cline

Case number (if known) _____

Case title Case number	Nature of the case	Court or agency	Status of the case
FirstAtlantic Bank v. Cline 16-2015-CA-5251	Foreclosure	Circuit Court, 4th Judicial Circuit	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

 No. Go to line 11. Yes. Fill in the information below.

Creditor Name and Address	Describe the Property Explain what happened	Date	Value of the property
Regions Bank P.O. Box 11007 Birmingham, AL 35288	7607 Jana Lane South Jacksonville, FL 32210	7/6/2016	\$30,100.00
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Regions Bank P.O. Box 11007 Birmingham, AL 35288	7610 Jana Lane South Jacksonville, FL 32210	7/25/2016	\$29,400.00
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Nationstar Bank	5631 Marathon Parkway Jacksonville, FL 32210	9/13/2016	Unknown
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Regions Bank P.O. Box 11007 Birmingham, AL 35288	7619 Jana Lane South Jacksonville, FL 32210	9/22/2016	Unknown
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Regions Bank P.O. Box 11007 Birmingham, AL 35288	4406 Melissa Court West Jacksonville, FL 32210	9/22/2016	Unknown
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		

Debtor 1 Carl W. Cline

Case number (if known) _____

Creditor Name and Address	Describe the Property	Date	Value of the property
Explain what happened			
Regions Bank PO Box 2153, Dept. 2520 Birmingham, AL 35287	5622 Bryner Dr Jacksonville, FL 32244 Duval County	10/4/2016	\$29,403.00
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Nationstar Mortgage, LLC PO Box 9096 Temecula, CA 92589	7663 Jana Lane South Jacksonville, FL 32210 Duval County	10/10/2016	\$0.00
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Nationstar Mortgage, LLC PO Box 9096 Temecula, CA 92589	4451 Melissa Court W Jacksonville, FL 32210 Duval County	9/14/2016	\$27,806.00
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		
Regions Mortgage PO Box 18001 Hattiesburg, MS 39404-8001	5574 Bryner Dr Jacksonville, FL 32244 Duval County	10/5/2016	\$32,573.00
	<input type="checkbox"/> Property was repossessed. <input checked="" type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized or levied.		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
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12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

Debtor 1 Carl W. Cline

Case number (if known) _____

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

 No Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600	Describe what you contributed	Dates you contributed	Value
Charity's Name Address (Number, Street, City, State and ZIP Code)			

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

 No Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
McConnell Law Group, P.A. 98 Glenalby Place Ponte Vedra, FL 32081 jmcconnell@mcconnelllawgroup.com	Attorney Fees for Chapter 7 Filing.	11/18/2016	\$5,065.00

McConnell Law Group, P.A. 98 Glenalby Place Ponte Vedra, FL 32081 jmcconnell@mcconnelllawgroup.com	Attorney Fees for pre-petition services in preparation of Chapter 11 filing. Debtor has also paid the \$1,717.00 filing fee.	4/13/2017	\$3,000.00
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17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.

Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
McConnell Law Group, P.A. 98 Glenalby Place Ponte Vedra, FL 32081	Attorney fees for representation of debtor in 18 foreclosure actions.	1/20/16; 2/12; 3/6; 4/13; 5/12; 7/14; 7/23; 8/10; 9/15; 11/9	\$26,035.00

Debtor 1 Carl W. Cline

Case number (if known) _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you			
JMH Real Estate, LLC			
	4331 Melissa Court West Jacksonville, FL 32210	Short sale for \$22,000	5/13/2016
None			
JMH Real Estate, LLC	4344 Melissa Court West Jacksonville, FL 32210	Short Sale for \$20,000	5/13/2016
None			
JMH Real Estate, LLC	4490 Melissa Court West Jacksonville, FL 32210	Short sale for \$20,000	5/13/2016
None			
Dolores J. Thelen	7648 Melissa Court North Jacksonville, FL 32210	Short Sale for \$20,000	5/13/2016
None			
Dolores J. Thelen	7659 Melissa Cort North Jacksonville, FL 32210	Short Sale for \$20,000	5/13/2016
None.			
Wilson Cline 8337 SE 177th Bartram Loop The Villages, FL 32162	5661 Bennington Drive Jacksonville, FL 32244	Short Sale for \$25,000	5/13/2016
Father			
Wilson Cline 8337 SE 177th Bartram Loop The Villages, FL 32162	5692 Bennington Drive Jacksonville, FL 32244	Short sale for \$20,000	5/13/2016
Father			
Wilson Cline 8337 SE 177th Bartram Loop The Villages, FL 32162	5630 Bryner Drive Jacksonville, FL 32244	Short sale for \$25,000	5/23/2016
Father			
Kirkland Financial, LLC	3020 Cobblewood Lane East Jacksonville, FL 32225	Deed in Lieu of Foreclosure	5/13/2016
None			
Brad Cline	2005 Honda Jet Ski and trailer	\$1,500 cash	12/31/2015
Brother			

Debtor 1 Carl W. Cline

Case number (if known) _____

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you Patrick Meyers	1996 Toyota Camry	\$1,500 cash	3/28/2016

None

CarMax Auto Store	2003 Buick LaSaber	\$2,000 cashier's check	4/15/2016
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None

Patricia A. Mallard Revocable Trust 7140 Cypress Cove Rd. Jacksonville, FL 32244	5864 Liska Dr., Jacksonville, FL 32244	Short sale for \$35,000	11/18/2016
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none

Dolores J. Thelen	Short sale of 8536 Colony Pine Circle W., Jacksonville, FL 32244 for \$47,500.	Debtor did not receive any funds from this transaction.	2/23/2017
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None

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

 No Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
Carl Cline Revocable Trust	8448 Boysenberry Lane, Jacksonville, FL and 320 1st Street North, #801, Atlantic Beach, FL (both properties are worth less than the mortgage debt and are subject to foreclosure)	2012
Cline Family Revocable Trust	All the properties contained in this trust were awarded to the Debtor's ex-wife in their divorce in 2014.	2012

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

 No Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Raymond James	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input checked="" type="checkbox"/> Other <u>IRA</u> <u>transferred to</u> <u>Roth IRA with the</u> <u>same institution</u>	2016	\$328,779.00

Debtor 1 Carl W. Cline

Case number (if known)

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Atlantic Coast Bank Race Track Road Branch Saint Johns, FL 32259	Carl W. Cline 904 Liatris Loop Saint Johns, FL 32259	Titles, personal paperwork, SS cards	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No
 Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Various Tenants	Suntrust Bank	Renter Deposits held in trust pursuant to FL statute. Individual leases to be provided to trustee.	\$22,920.00

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

Debtor 1 Carl W. Cline

Case number (if known)

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
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26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
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Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation
 No. None of the above applies. Go to Part 12.
 Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.
CWC Ventures LLC 904 Liatris Loop Saint Johns, FL 32259	Real estate investment co. owned through the Debtor's Roth IRA. All profits held in RIRA until Debtor reaches retirement age.	Dates business existed EIN: 81-2584418 From-To 5/3/2016-Present

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No
 Yes. Fill in the details below.

Name Address (Number, Street, City, State and ZIP Code)	Date Issued
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Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Carl W. Cline
 Carl W. Cline
 Signature of Debtor 1

Signature of Debtor 2

Date April 21, 2017

Date

Debtor 1 Carl W. Cline

Case number (if known) _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1 **Carl W. Cline**

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: Middle District of Florida

Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/15

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

■ **Not married.** Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<i>Column A Debtor 1</i>	<i>Column B Debtor 2</i>
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$ _____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 3,000.00	\$ _____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ _____
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from a business, profession, or farm	\$ 0.00	Copy here -> \$ 0.00
6. Net income from rental and other real property	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ 16,000.00	
Ordinary and necessary operating expenses	-\$ 13,000.00	
Net monthly income from rental or other real property	\$ 3,000.00	Copy here -> \$ 3,000.00

Debtor 1 Carl W. Cline

Case number (if known) _____

7. Interest, dividends, and royalties**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ **0.00**
 For your spouse \$ _____

**Column A
Debtor 1**\$ **0.00****Column B
Debtor 2**

\$ _____

9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.**10. Income from all other sources not listed above.** Specify the source and amount.
 Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism.

If necessary, list other sources on a separate page and put the total below.

\$ **0.00** \$ _____

Total amounts from separate pages, if any.

\$ _____ \$ _____
 \$ **0.00** \$ _____
 + \$ **0.00** \$ _____

11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$ 6,000.00	+	\$ _____	=	\$ 6,000.00
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Debtor 1 Carl W. Cline

Case number (*if known*) _____

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

/s/ Carl W. Cline
Carl W. Cline
Signature of Debtor 1

Date April 21, 2017
MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

\$245	filings fee
\$75	administrative fee
<u>+</u>	<u>\$15</u> trustee surcharge
<u>\$335</u> total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167	filing fee
+	\$550 administrative fee
	\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+ \$75	<u>administrative fee</u>
\$275 total fee	

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+ \$75	<u>administrative fee</u>
\$310 total fee	

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court
Middle District of Florida**

In re Carl W. Cline

Debtor(s)

Case No.

Chapter 11

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: April 21, 2017

/s/ Carl W. Cline

Carl W. Cline

Signature of Debtor

Carl W. Cline
904 Liatris Loop
Saint Johns, FL 32259

Michael Corrigan
Duval County Tax Collector
231 E. Forsyth St., Ste 300
Jacksonville, FL 32202

Jerrett M. McConnell
McConnell Law Group, P.A.
98 Glenalby Place
Ponte Vedra, FL 32081

Nationstar Mortgage, LLC
PO Box 9096
Temecula, CA 92589

Chase Mortgage
P.O. Box 9001871
Louisville, KY 40290-1020

Regions Bank
P.O. Box 2153
Birmingham, AL 35287

Ditech Financial LLC
PO Box 6172
Rapid City, SD 57709

Regions Mortgage
PO Box 18001
Hattiesburg, MS 39404-8001

Federal National Mortgage
c/o Choice Legal Group, P.A.
PO Box 9908
Fort Lauderdale, FL 33310

Shapiro, Fishman & Gache
4630 Woodland Corporate Blvd
Suite 100
Tampa, FL 33614

Gibbons Neuman
3321 Henderson Blvd
Tampa, FL 33609

Wilson Cline
8337 SE 177th Bartram Loop
The Villages, FL 32162

GKC Finance Service, LLC
c/o Steve Felkowitz
4310 Sheridan St., Ste 202
Hollywood, FL 33021

Heather Ridge HOA
The CAM Team, Inc.
1008-120 Park Ave.
Orange Park, FL 32073

Metropolitan Mixed Use COA
c/o Assoc. Mgmt of Ponte Ved
3108 Sawgrass Village Cir.
Ponte Vedra Beach, FL 32082

United States Bankruptcy Court
Middle District of Florida

In re Carl W. Cline

Debtor(s)

Case No.

Chapter

11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$ <u>3,000.00</u>
Prior to the filing of this statement I have received	\$ <u>3,000.00</u>
Balance Due	\$ <u>0.00</u>

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

The fee paid is for pre-petition services in the preparation and filing of the Chapter 11 only.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Post-petition services will be provided at the rate of \$300.00 per hour subject to review by the United States Trustee and approval of the Bankruptcy Court.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

April 21, 2017

Date

/s/ Jerrett M. McConnell

Jerrett M. McConnell 0244960

Signature of Attorney

McConnell Law Group, P.A.

98 Glenalby Place

Ponte Vedra, FL 32081

(904) 824-2222 Fax: (904) 824-2225

jmcconnell@mcconnelllawgroup.com

Name of law firm